SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 8 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) GOP Generation Y Fund	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William M Yarbrough Mailing Address 9312 N. Picture Ridge City Peoria FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify)	Rd State Zip Code IL 61615-1748 C Occupation Inventor Aggregate Year-to-Date 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9 2 3 2 0 0 8 Transaction ID: AE3AFC4D3BD6D4199A Amount of Each Receipt this Period 5000.00
Full Name (Last, First, Middle Initial) Mrs. Vicki A Petersen Mailing Address 830 W. Trailcreek Dr City Peoria FEC ID number of contributing federal political committee. Name of Employer Homemaker Receipt For: Primary General Other (specify)	State Zip Code IL 61614-1862 C Occupation Homemaker Aggregate Year-to-Date 5000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Mark B Petersen Mailing Address 830 W. Trailcreek Dr City Peoria FEC ID number of contributing federal political committee. Name of Employer Petersen Health Care Receipt For: Primary General Other (specify)	State Zip Code IL 61614-1862 C Occupation Nursing Home Owner/Operator Aggregate Year-to-Date 5000.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	15000.00